

# Health Screening Invitation

Dear [Patient's Name],

We are pleased to welcome you to our practice! As a newly established patient, we invite you to participate in a complimentary health screening.

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Location]

This screening will help us better understand your health needs and establish a personalized care plan. During the appointment, we will perform a series of assessments including blood pressure measurement, cholesterol screening, and more.

Please confirm your attendance by [Insert RSVP Date] by contacting us at [Insert Phone Number] or [Insert Email Address].

We look forward to meeting you and supporting your health journey.

Sincerely,

[Your Practice Name]

[Your Name]

[Your Title]